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Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

2011

Open to Public Inspection
for 501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue Service

For calendar year 2011 or other tax year beginning 7/1/2011, and
ending 6/30/2012 See separate instructions.

A <input type="checkbox"/> Check box if address changed B Exempt under section <input checked="" type="checkbox"/> 501 (C) (3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)	Print or Type	Name of organization (<input type="checkbox"/> Check box if name changed and see instructions) LUBBOCK CIVIC BALLET dba BALLET LUBBOCK, INC	D Employer identification number (Employees' trust, see instructions) 51-0163294
		Number, street, and room or suite no If a P O box, see instructions 5702 GENOA City or town, state, and ZIP code LUBBOCK TX 79424	
C Book value of all assets at end of year	F Group exemption number (See instructions)		
G Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust			

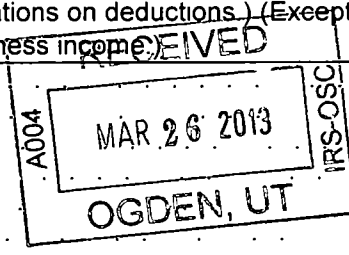
H Describe the organization's primary unrelated business activity ▶ **INSTANT BINGO GAMING**

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes No
If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ **DONNA PIERCE** Telephone number ▶ **(806) 741-0059**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales <u>641,575</u>			
b	Less returns and allowances			
c Balance ▶		1c	641,575	
2	Cost of goods sold (Schedule A, line 7)	2	494,496	
3	Gross profit Subtract line 2 from line 1c	3	147,079	147,079
4 a	Capital gain net income (attach Schedule D)	4a		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c	Capital loss deduction for trusts	4c		
5	Income (loss) from partnerships and S corporations (attach statement)	5		
6	Rent income (Schedule C)	6		
7	Unrelated debt-financed income (Schedule E)	7		
8	Interest, annuities, royalties, and rents from controlled organizations (Schedule F)	8		
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10	Exploited exempt activity income (Schedule I)	10		
11	Advertising income (Schedule J)	11		
12	Other income (See instructions; attach schedule.)	12		
13	Total. Combine lines 3 through 12	13	147,079	0
				147,079

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)				
14	Compensation of officers, directors, and trustees (Schedule K)	14		
15	Salaries and wages	15		16,800
16	Repairs and maintenance	16		
17	Bad debts	17		
18	Interest (attach schedule)	18		
19	Taxes and licenses	19		2,557
20	Charitable contributions (See instructions for limitation rules.)	20		
21	Depreciation (attach Form 4562)	21		
22	Less depreciation claimed on Schedule A and elsewhere on return	22a		
23	Depletion	23		
24	Contributions to deferred compensation plans	24		
25	Employee benefit programs	25		
26	Excess exempt expenses (Schedule I)	26		
27	Excess readership costs (Schedule J)	27		
28	Other deductions (attach schedule)	28		124,572
29	Total deductions. Add lines 14 through 28	29		143,929
30	Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13	30		3,150
31	Net operating loss deduction (limited to the amount on line 30)	31		
32	Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32		3,150
33	Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions.)	33		1,000
34	Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34		2,150



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Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> See instructions and		
a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ _____ (2) \$ _____ (3) \$ _____		
b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ _____ (2) Additional 3% tax (not more than \$100,000) \$ _____		
c Income tax on the amount on line 34	35c	323
36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	36	
37 Proxy tax. See instructions	37	
38 Alternative minimum tax	38	
39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies	39	323

Part IV Tax and Payments

40 a Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)	40a		
b Other credits (see instructions)	40b		
c General business credit. Attach Form 3800 (see instructions)	40c		
d Credit for prior year minimum tax (attach Form 8801 or 8827)	40d		
e Total credits. Add lines 40a through 40d	40e		0
41 Subtract line 40e from line 39	41		323
42 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	42		
43 Total tax. Add lines 41 and 42	43		323
44 a Payments: A 2010 overpayment credited to 2011	44a		
b 2011 estimated tax payments	44b		
c Tax deposited with Form 8868	44c		
d Foreign organizations Tax paid or withheld at source (see instructions)	44d		
e Backup withholding (see instructions)	44e		
f Credit for small employer health insurance premiums (Attach Form 8941)	44f		
g Other credits and payments: <input type="checkbox"/> Form 2439 _____ <input type="checkbox"/> Form 4136 _____ <input type="checkbox"/> Other _____ Total ▶	44g		0
45 Total payments. Add lines 44a through 44g	45		0
46 Estimated tax penalty (see instructions) Check if Form 2220 is attached <input type="checkbox"/>	46		
47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed	47		323
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid	48		0
49 Enter the amount of line 48 you want Credited to 2012 estimated tax ▶ Refunded ▶	49		0

Part V Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2011 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here ▶ _____	Yes	No
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.		X
3 Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$ _____		

Schedule A—Cost of Goods Sold. Enter method of inventory valuation ▶

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2	19,001	7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	494,496
3 Cost of labor	3		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
4 a Additional section 263A costs (attach schedule)	4a				X
b Other costs (attach schedule)	4b	475,495			
5 Total. Add lines 1 through 4b	5	494,496			

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here *Neil W. [Signature]* **3-20-13** **Executive Director**

Signature of officer Date Title

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input checked="" type="checkbox"/> if self-employed	PTIN
	DONNA PIERCE	<i>Donna Pierce</i>	3/7/2013		P01038345
	Firm's name ▶ DONNA PIERCE, ENROLLED AGENT	Firm's EIN ▶ 75-2839934			
	Firm's address ▶ P O BOX 53788, LUBBOCK, TX 79453	Phone no (806) 741-0059			

Schedule C—Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property		
(1)		
(2)		
(3)		
(4)		
2. Rent received or accrued		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	
(1)		
(2)		
(3)		
(4)		
Total 0		0
(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) 0		(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) 0

Schedule E—Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%	0	0
(2)		%	0	0
(3)		%	0	0
(4)		%	0	0
Totals			Enter here and on page 1, Part I, line 7, column (A) 0	Enter here and on page 1, Part I, line 7, column (B) 0
Total dividends-received deductions included in column 8				

Schedule F—Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					
Nonexempt Controlled Organizations					
7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10	
(1)					
(2)					
(3)					
(4)					
Totals			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A) 0	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B) 0	

Schedule G—Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)				0
(2)				0
(3)				0
(4)				0
Totals	Enter here and on page 1, Part I, line 9, column (A) 0			Enter here and on page 1, Part I, line 9, column (B) 0

Schedule I—Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)			0			0
(2)			0			0
(3)			0			0
(4)			0			0
Totals	Enter here and on page 1, Part I, line 10, col (A) 0	Enter here and on page 1, Part I, line 10, col (B) 0				Enter here and on page 1, Part II, line 26 0

Schedule J—Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))	0	0	0	0	0	0

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5 but not more than column 4)
(1)			0			0
(2)			0			0
(3)			0			0
(4)			0			0
(5) Totals from Part I	0	0				0
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col (A) 0	Enter here and on page 1, Part I, line 11, col (B) 0				Enter here and on page 1, Part II, line 27 0

Schedule K—Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0

Line 4b, Sch A (990-T) - Other Costs for Cost of Goods Sold

1	Travel, Meals and Entertainment		
	a Travel		1a _____
	b Total meals and entertainment	1b _____	
	c 50% of line b	1c _____	0
	d Subtract line c from line b		1d _____ 0
2	Depreciation		2 _____
3	Compensation of officers		3 _____
4	Salesperson wages and commissions		4 _____
5	Indirect labor		5 _____
6	Rent		6 _____
7	Amortization		7 _____
8	Freight-in		8 _____
9	Supplies		9 _____
10	Taxes		10 _____
11	Utilities		11 _____
12	CASH PRIZES-INSTANT BINGO		12 _____ 475,495
13			13 _____
14			14 _____
15			15 _____
16	Total other costs		16 _____ 475,495
17	Reduction of expenses for offsetting credits (see attached statement)		17 _____ 0
18	Total other costs less expenses for offsetting credits		18 _____ 475,495

Line 28 (990-T) - Other Deductions

1	SEE STATEMENT II ATTACHED	1	124,572
2	Total other deductions	2	124,572
3	Total deductions less expenses for offsetting credits	3	124,572

BALLET Lubbock INC.

FYE 6/30/2012 FORM 990-T
51-0163294 STATEMENT I

Prepared By	Initial	Date
Approved By		

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	1	2	3
Form 990-T - Part I - Line 1a	GROSS RECEIPTS		
GROSS INSTANT BINGO	641,575.50		
Form 990-T PCNA COST OF SALES			
INSTANT BINGO PRIZES	475,495.00		
INSTANT BINGO SUPPLIES	19,001.39		
	494,496.39		
Form 990-T PART II LINE 15 -	SALARIES		
1050cc @ 160. ⁰⁰	16,800.00		
Form 990-T PART II - LINE 19 -	TAXES - Payroll		
SALARIES - INSTANT BINGO	16,800.00		
1 CLERICAL/INU	271325		
1 BOOKKEEPING	1046540		
1 SECURITY	97824		
	30,956.89		
	x 9.26%		
	2857.03		

BALLET LABDOCK INC

FYE 6/30/12 FORM 990-T

51-0163294 STATEMENT II

Prepared By	
Reviewed By	

PART II - LINE 28		TOTAL	APPLICABLE	INSTANT
		BINGO	%	BINGO
OTHER DEDUCTIONS		EXPENSE	(1)	EXPENSE
1	CASH SHORTAGES	172.00	73.83%	126.98
2	ADVERTISING/PROMO	1481.91	✓	1094.09
3	WAGES - BOOKKEEPING	14,175.00	✓	10465.40
4	✓ - CLERICAL/INV.	3675.00	✓	2713.25
5	✓ - SECURITY	1825.00	✓	978.24
6	LICENSE	2500.00	✓	1848.25
7	MISC.	375.00	✓	276.86
8	RENT	61800.00	✓	45626.94
9	Acct Fees	6190.00	✓	4570.07
10	Office Supplies	402.81	✓	297.39
11	Amt. Req. to be Dist.	54320.00	✓	40104.45
12	UTILITIES	10,103.06	✓	7459.08
13	JANITORIAL Supplies	4479.48	✓	3307.20
14	PRIZE Fee Expense	3194.15	100%	3194.15
15	BK CHGS / Debit Fees	3402.86	73.83%	2512.33
16				124,572.18
23	① EXPENSE ALLOCATION METHOD - GROSS PROFIT METHOD			
24		TOTAL	INSTANT	
25		BINGO	BINGO	
26	GROSS RECEIPTS	1004100.	641,575.	
27	LESS: CASH PRIZES	< 737,995 >	< 475,495 >	
28	LESS: PAPER/PULL TABS	< 22,347 >	< 19,001 >	
29	LESS: CARD MINORS	< 44,567 >	< 0 >	
30		199,202.	147,079.	
31				
32		147,079.	= 73.83%	
33		199,202.		